FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSUBER SUBMINARY BACK

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File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073 DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, ell statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all 2011 JAN 19 PM 3: 4,5 statements and reports filed by all committees for state office must be filed

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically. Reselform COMMITTEE NAME (Must be some as on Statement of Organization) EORM Joell Deppe for Auditor Committee DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retartion Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC ( (Rev. 12/2009) REPORT For Office Use Only 11 ) Local Ballot Issue Comm. # CANDIDATE COMMITTEES ONLY: Logged In 2 Candidate Name Political Party (if applicable) Scanned SL Computer Office Sought District (if Senate or House) Audited Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filling timely and accurate reports. 15<u>353</u>1 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED IAM FILING A Junuary 1, 2010 - December 31, 2010 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate by # 2 ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3 County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held Jackson County STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 1,221.45 ADD TOTAL MONEY TAKEN IN THIS PERIOD 0.00 Schedule A: Cash Contributions total (Attach Schedule A) (\*also see In-kind below) ..... Schedule F: Loans Received total (Attach Schedule F) 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... 0.00 (Schedule H applies to Candidates' Committees Only) 1,221.45 SUB-TOTAL......\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below). ... ... 0.00 0.00 Schedule F: Loan Repayments total (Attach Schedule F)..... 1,221.45 \*\*UNPAID BILLS (From Schedule D - Attach Schedule D) ... and an analysis of the state of the sta 0.00 0.00 1.535.19 CONSULTANT BREAKDOWN (Schedule G Attached?) YES \_\_\_\_NO CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

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COMMITTEE NAME(MU	at be same as on Statement of Organization)	e.r	RESET	SCHEDULE	LOAN
Joell Deppe for Audit	tor Committee			(Rev. 02/08)	LOAN: RECEIV & REPA
IOTE: This schedulo rep OTAL UNPAID LOANS	ports maney loaned to the committee which is deposited in FROM LAST REPORTING PERIOD \$ 1535,19	Une committee accou	nt.	CHECK 1	THIS BOX
'ART' I - MONETARY LO (Original source	OANS RECEIVED <u>THIS</u> REPORTING PERIOD a of loan, such as a bank, must be shown it a third party is i	nvõivad. Includa loei	ns from candid	late's parsonal fu	inda)
DATE RECEIVED	NAME AND ADDRESS OF LENDER (Include Endorsor's Name, If Applicable)	RELATIO	NSHIP TO	LAMOUNTO	
(MM/DD/YR)	(motion discorders Name, it Applicable)	CANDIDATE	(if Applicable*	)	
				\$	
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DATE PAID	OAN REPAYMENTS MADE THIS REPORTING PERIOD IN MUST be reported on Schedule E - In-kind Contributions.)  NAME AND ADDRESS OF LENDER	TOTAL (PART		\$AMOUNT RE	
(MM/DD/YR)	(Include Endorser's Name, if Applicable)	CANDIDATE (			PAID
				\$   	
			<del></del>		
	TOTAL CASH R	EPAYMENTS (PAR	T II)	s <u>0</u>	<u></u>
	From Schedule E - TOTA	L LOANS FORGIVE		s <u>0</u>	RP40-4
Nedous In	TOTAL OUTSTANDING LOANS EN		IOD :	s 1535.19	<del></del>
on proposity (blood relat	andidate committees to disclose the relationship of any relationship of any relationship must be shown to the third degives) and affinity (relatives by marriage). If surname of comutitier is no familial relationship, enter "not applicable" in til applies	ree of	Page_1	of 1 (for Schedule F	<del>)****</del>